Jimmy Breslin on Welfare • New SRS Chief Talks Strategy • Stopping Welfare Fraud

THE SOCIAL AND REHABILITATION

Record

September 1976

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See Page 28

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THE SOCIAL AND REHABILITATION
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The Social and Rehabilitation Record is the official periodical of the Social and Rehabilitation Service of HEW. It is published 10 times a year by the SRS Office of Public Affairs. *The Record* is designed to provide information that will help professionals in State and local agencies and private organizations do a more effective job of carrying out programs which help people in need. The programs include social services for families and individuals, medical services, and assistance payments. Annual subscriptions are $6.40 (domestic) and $8 (foreign) and are paid to the Superintendent of Documents, P.O. Box 1533, Washington, D.C. 20402. Address manuscripts and article ideas to the Editor, Rm. 5327 MES Building, SRS/HEW, Washington, D.C. 20201. Telephone 202-245-2196. Publication funds were approved by the Office of Management and Budget on February 25, 1972, amended December 4, 1973.

For the Record

"I've been isolated from Washington for years. I'm surprised to hear from you."

That was the reaction of Philip Lazaro, director of the Essex County Welfare Board in New Jersey. Mr. Lazaro was responding to a telephone call from *The Record* about his success in reducing welfare fraud. His success had caught the eye of *The New York Times* and the newspaper's article caught ours. The story of Mr. Lazaro's tactics for stopping fraud in the Aid to Families with Dependent Children program, begins on page 18 along with some of the techniques used by other agencies.

As we told Mr. Lazaro, SRS and HEW are trying to establish better communications in many areas, and *The Record* is making its contribution to this total effort by opening its pages to viewpoints which may be at variance with today's official policy.

We are also looking outside the Federal-State structure for the views of experts in various fields, the persons who are receiving the services and those who independently monitor the pulse of society.

One such monitor of our changing society is Jimmy Breslin who, with his accustomed tongue in cheek, addresses the serious problem of how best to help a person land a job and keep it when that person has little or no experience at working.

There are doubtless many ideas today which will become tomorrow's official policy. But they must be brought out and exposed to the light of examination.

Consider *The Record* your forum for these ideas. Send us articles, letters to the editor, or just tell us where the facts are buried. We'll try to put your ideas on the record.

Martin Judge

A Brief History of Social Services

by Martin Judge, Editor

This is the first in a series of articles which highlight the milestones of development of the public assistance program since this Nation's founding 200 years ago. But public assistance as we know it today is firmly rooted in the practices of 12th Century England.

During the Middle Ages, the Catholic Church rather than the government ministered to those in need. No one questioned that it was done fairly and efficiently. Indeed, who would know better the plight of each person in need than the parish priest? And because of this personal relationship with the recipients abuses were rare.

The prevailing attitude toward the poor was: "Poverty is not a kind of crime." and "A poor man is an honorable person."[1]

According to the interpretation of the Scripture, a person's first responsibility was to his family, including his parents, next to neighbors and finally to strangers. In fact, there was great social pressure for a family which had more than enough for its needs to contribute to those less fortunate.

The test of eligibility was simply evidence of need. And in case there was doubt about how much assistance was needed, the tendency was to give too much rather than too little. No one was excluded, although able-bodied beggers and those who plyed such trades as fortune telling were suspect.

But times changed and with them the attitute toward assistance for strangers.

With the bubonic plague reducing the population of the country by 25 percent in 1348 and 1349, the demand for labor increased and people were encouraged to seek out the highest paying jobs. In the economic turmoil, gangs also roamed the countryside so anyone who traveled, even to find a better job, was suspect. Not all found the jobs they sought and some became a burden on the community.

Because of these factors, the first Law of Settlement was enacted in 1388 to retard the mobility of the jobless. The law prescribed punishment for those who were fit but did not work and allowed those who could not work to beg only in their current residence or their birthplace.

Elizabethan Poor Law

During the following 200 years responsibility for the poor flowed slowly from the church to the government. And by the time the Elizabethan Poor Law of 1597-1601 was written, the shift was complete.

The law was written with an eye toward preserving order in an economic crisis and endorsed the right to public assistance, charging the government with its administration.

This law also, for the first time, clearly delineated the three categories of persons needing assistance and constructed a system for delivering it.

Those who were involuntarily unemployed, such as the handicapped or the aged, could be sustained in their own nomes. Orphans, children whose parents could not care for them and those who were deserted were apprenticed out. Able-bodied men who were unable to find jobs could go to the almshouse and receive materials with which to work. Vagrants or other able-bodied persons who would not work were sent to houses of correction or jail.

The assistance system was administered at the parish level by overseers of the poor who were appointed by local officials. The program was financed by local taxes.

For two generations after the Poor Law was enacted, less than seven percent of public funds was used for assistance in any one year. This was due in large part to Protestant doctrine which emphasized the nobless oblige of those who had more than they needed. Buttressing this was the deep-seated feeling that a parish must take care of its own. Moreover, there was a stigma attached to a parish which did not discharge its responsibility to the poor.

Law of Settlement of 1662

It was late in the 17th Century when the accumulation of wealth became a prime virtue and dependency became a vice. The prevailing attitude was that a character flaw caused dependency. In 1662 a more severe Law of Settlement and Removal was passed, and there were various experiments to make workhouses pay for themselves. But none of the experiments worked. Most workhouses opened to be closed quickly and permanently.

This portion of a 15th Century painting shows customary hospitality given strangers, a custom which was to change.

The new Law of Settlement allowed newcomers to a community to be banished if it appeared they might become dependent on the parish. But since it often took more money to escort a family back to its former residence than to assist them, the law was rarely enforced. On the average only one or two persons were returned by a parish each year.

Before Adam Smith advocated in his *Wealth of Nations* that business and the natural laws of supply and demand should determine the outcome of commerce without government regulation, trade had been rigidly controlled. As the idea grew in popularity in business, its repercussions were also felt in the attitude toward public assistance.

By 1800 slightly more than 1 percent of the nine million persons in England were housed in some 4,000 workhouses. But the preponderance of the assistance was given to those in their homes and now came in the form of money.

Poor Law Reform of 1834

Between 1803 and 1818 the expenditure for the poor nearly doubled, and by 1832 it was more than three times the level of 1776. With the mounting tax burden of assistance causing dissatisfaction among the people, Parliament appointed a commission to investigate suspected abuses. Ignoring the economic dislocations of the Industrial Revolution, the commission called the Poor Law "a bounty on indolence and vice." (This remark was particularly directed at the practice of supplementing wages.)

English Poor Tax and Per Capita Expenditures for Selected Years, 1776–1832
(In Thousands)

Year	Poor Tax	Population	Per Capita Expenditure
1776	£1,530[a]	8,000[a]	3s. 10d.
1803	4,078	9,210	8s. 11d.
1818	7,871	11,876	13s. 3d.
1832	7,037	14,105	10s. 2d.

SOURCE: Sidney and Beatrice Webb, *English Local Government: English Poor Law History, The Last Hundred Years*, Pt. II, Vol. II, pp. 1037-38.

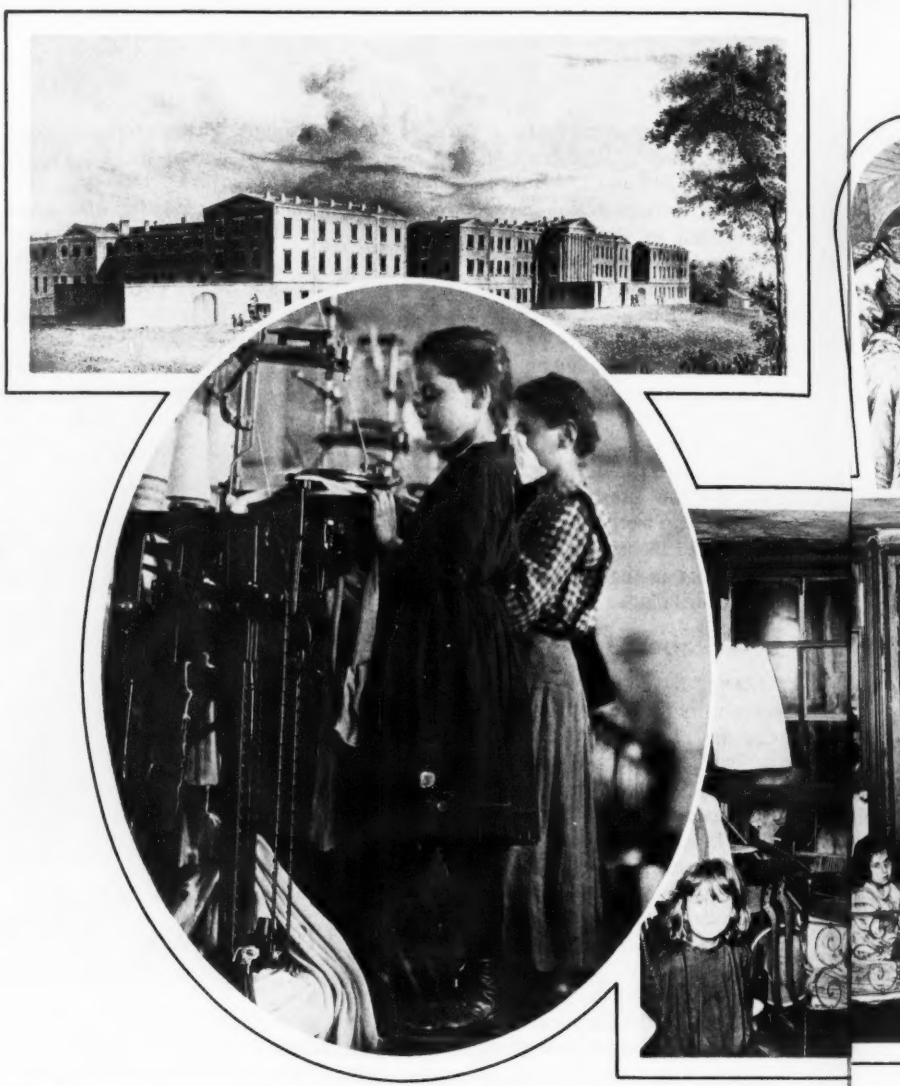
Historians Sidney and Beatrice Webb analyze the reasons behind the Poor Law reform in 1834:

"What aroused the ruling class . . . in 1834 drastically to transform the whole system, were neither the horrors of the workhouse, nor the proved abuses of 'farming the poor,' nor even the cruelties incident on the spasmodic enforcement of the Law of Settlement and Removal. More effective as a spur to legislative action was the continual rise in the Poor Rates, with the threat of their indefinite increase at the expense of the landlord's rental; or the sudden revelation in 1830 of the danger of rural insurrection, with the continual extension of pauperism to the greater part of the agricultural population of Southern England, and even to the wage-earners of some of the industrialized districts of the Midlands and the poorer parishes of the Metropolitan area. This devastating flood of pauperism seemed to be coincident with the general adoption of the Allowance System, and especially of the family relief scales inaugurated by the Berkshire Justices at Speenhamland in 1795."[2]

The main thrust of the reform was to restrict public assistance to the workhouse, which was more accurately termed "almshouse" at this time. Here even the able-bodied man who could not find a job and his family could find assistance.

A guiding principal of public assistance was that those receiving it should not fare better—or appear to fare better—than those earning the lowest wage no matter what the need. Exempt from this doctrine of "less eligibility" were the aged and children who, it was felt, should receive extra comforts. Children were also encouraged to attend school.

But local officials continued to grant assistance to those outside the almshouse, including wage supplements. Small wonder, since a 1854 study of Lancashire showed it cost 60 percent more to maintain a recipient within the almshouse as opposed to outside of it. In London skyrocketing costs pushed the cost of operating almshouses to double that of so-called outside assistance.



Public Assistance in America

The American colonies and later the States essentially adopted the Elizabethan Poor Law and the Law of Settlement and Removal of 1662, and their attitudes toward public assistance generally paralleled that of England.

During the 18th Century, there was a steady, if relatively small, stream of immigrants. The vast majority were of modest means if not poor. Moreover, many of them were paupers, vagrants and convicts shipped out by the Crown as indentured servants—all ripe for public assistance. In addition to this, the French and Indian War and other frontier conflicts drove many settlers back to the Eastern Seaboard to become dependent on public assistance.

To be eligible for assistance a person was usually required to own property and have been a resident of his community for a prescribed period of time. A 1836 Pennsylvania law set the resident requirement at one year and required that the resident be a $10 lease holder. New York was more liberal, requiring only a year's residency.

The residency requirement was based on the theory that if a person had contributed to the community through taxes or his labor, he was entitled to benefit from public assistance.

Before public coffers were tapped, however, the needy person's parents, grandparents, and children were required to do all they could to support him. By 1836 all States along the Atlantic Seaboard had added grandchildren to this list, with the exception of New York and the southern States. Later many States added brothers and sisters.

An 1824 report by the Secretary of State of New York showed that the four principal methods of caring for the needy were:

Photos clockwise from top right: Mealtime between the decks of an immigrant ship, 1870. A tenement flat in New York circa 1885. For children too short to operate machines, there were always boxes available. Blockley Almshouse, Philadelphia circa 1835.

- Assistance in their homes.
- Assistance in the almshouse.
- The contract system, where a caretaker is selected and paid a fee to care for a group of persons on assistance.
- The auction of the poor, which was really an auction in reverse where the person who asked the lowest fee to provide care received the contract.

Of the four methods of caring for the poor and disabled, almshouses were favored. One reason was that they were supposed to improve their occupants' moral fiber and instill the work ethic. The other was they were thought to be cheaper. Care was taken to be sure almshouses were not so comfortable that tenants would not be encouraged to seek jobs outside.

By 1730 all the leading seaports had an almshouse, except Newport. And a century later there were 30 almshouses alone in the State of New York.

In the Atlantic Seaboard cities almshouses were in large measure free hospitals and some later evolved into prestigous hospitals, such as Bellevue Hospital in New York, General Hospital in Philadelphia and Baltimore City Hospitals.

However, in 1838 rumors about maltreatment and overcrowding of residents of a New York almshouse triggered charges and then an investigation. The investigation showed:

- The sane were housed with the insane.
- The sick mingled with the well.
- Many buildings did not afford decent shelter.
- And in one case 12 women and children were billeted in one 17- by 18-foot room.

In 1856 an investigation of 55 New York almshouses revealed conditions had not changed. The report of that year said:

"The poor houses throughout the State may be generally described as badly constructed, ill-arranged, ill-warmed, and ill-ventilated. The rooms are crowded with inmates . . . In some cases, as many as forty-five inmates occupy a single dormitory, with low ceilings, and sleeping boxes arranged in three tiers one above another. Good health is incompatible with such arrangements . . . . "The want of suitable hospital accommodations is severely felt in most of the poor houses . . . . "A great evil of the poor houses is idleness. Its effects are most visible in the winter season, when the houses are crowded, when there is little outdoor work to be done, and when the inmates are in the most vigorous state to do full work. In all the large counties, at least, work houses should be established . . . and suitable legal power should be given to the proper officers to consign able-bodied paupers to the work house instead of the poor house proper. Such work houses would tend to diminish pauperism; at all events, to diminish the burthen of it."[3]

In 1832 a survey of 38 towns and cities showed that public assistance in the almshouse was favored over assistance given to persons in their own homes, which was called "outdoor relief." At this time 4,535 persons were known to be in almshouses with 398 persons and 1,666 families receiving outdoor relief in their homes.

But the trend toward more outdoor relief was beginning. From 1830 to 1860 the amount of money spent by the State of New York for this type of assistance varied between 34 and 50 percent of its total assistance budget. In Boston between 1825 and 1860 the percentage of money spent for outdoor relief rose from 25 to 40 percent. Not all States followed suit. Maryland, for instance, authorized its counties to dispense outdoor relief to not more than 20 persons.

In 1839 the Pennsylvania Legislature liberalized the law passed four years earlier so that the maximum period for assistance outside the almshouse, six months, could be renewed for a second six months.

The Philadelphia Board of Guar-

dians of the Poor in 1857 concluded that outdoor relief was not only more humane but also less expensive than the almshouse. And the city's mayor said that sending large numbers to an almshouse would reduce the self-reliance of those in temporary need.

That same year New York State's Senate Committee issued a report which said, "A still more efficient and economical auxiliary in supporting the poor, and in the prevention of absolute pauperism, consists in the opinion of the committee, in the proper and systematic distribution of outdoor relief."

The economic depressions and panics which occurred from 1800 to the Civil War caused a growing awareness of what was termed "involuntary unemployment." And in 1821 the New York Society for the prevention of Pauperism, a Quaker group, recognized "want of employment" as a cause of pauperism.

In 1849 the United States Marine Hospital was established to meet the needs of the hordes of sick and disabled gold prospectors who were arriving in California.

At the same time, opponents of public assistance saw the great danger in recipients regarding assistance as a right rather than a gift. They spoke of widespread scandals on the municipal level in the administration of public assistance and argued for its abolition.

Rise of Volunteer Charities

When it was discovered in 1874, that the Tweed Ring had raided New York's treasury of $100 million and that there were serious irregularities in the Department of Public Charities and Correction, the city suspended all outdoor relief for six months. At the end of the moritorium the city voted large sums of money for outdoor relief, but stipulated that distribution must be made by volunteer agencies.

Three years later the first Charity Organization Society, a volunteer charity, was founded in Buffalo. By 1892 there were 92 local societies. The society had the reputation of taking a scientific approach to assistance, but its philosophy and methods of operation were often a rehash of earlier themes.

Pauperism, it said, was caused by personal defects and assistance was simply a necessary evil. A founder of the society put its philosophy this way: "man is a spiritual being and, if he is to be helped, it must be by spiritual means."

Assistance would not be given to everyone, however. A drunkard could receive nothing, nor could his family unless his wife elected to leave him. Widows with young children would be aided, but not wives whose husbands had deserted them because such aid would encourage desertion. If possible, the husband who deserted should be forced to support his wife and children.

To avoid duplication of effort and to avoid fraud, the society proposed to establish a central registry of persons receiving assistance. Paid investigators would verify need and prevent abuses, while volunteers would visit those on assistance to give encouragement and counsel. The society felt visits by volunteers would reduce class conflict, on the one hand, by giving those of means a better understanding of the less fortunate and, on the other, by engendering appreciation on the part of those receiving assistance. In practice, the rich did not respond nearly so readily as leaders of the society had expected.

With a trend to tighter administration of assistance, State Boards of Charity were formed to oversee various institutions such as hospitals, penal institutions and public assistance agencies. In 1863 Massachusetts established a State Board of Charity which was composed of prominent citizens who donated their services and a salaried executive with several assistants. By 1879 nine States had such boards.

A decided shift in control of assistance from government to volunteer agencies was signaled at the 1895 meeting of the Conference of Charities and Corrections, when the conference elected a leader of the Charity Organization Society as its president.

Children worked 10 to 12 hours along side adults in the 1880s.

By 1897 there were 16 State boards of charity and by the close of the century one State after another had established institutions for the mentally ill and physically handicapped children. Children were being taken out of almshouses and placed in children's institutions or with families for foster care.

During the 1890s, leaders of the Charity Organization Society more readily accepted the economic theory that social conditions contributed to dependency. Considerable impetus was given to this notion by Amos G. Warner, a political economist who had headed two of the society's chapters. Wrote Warner in 1894: "Disease pro-

duces poverty, and . . . poverty produces disease; . . . poverty comes from degeneration and incapacity, and . . . degeneration and incapacity come from poverty. Yet it is not without benefit to trace the whole dismal round of this vicious circle, for it well illustrates the interaction of social forces. . . . But in tracing the long circle . . . there have been many contributory forces . . . which are distinctly preventable especially those pertaining to occupations, and many of those pertaining to the manner of living. . . . "[4]

He also pointed out that "most of those out of employment are not capable in any complete sense of the term. They may be able-bodied, but they are not able-minded. They may lack one thing or another, but they almost always lack something; it may be skill, or strength, or judgment, or reliability, or even-temper. For the faithful and efficient there is work in all ordinary times."[5]

On whether private or public assistance is better, Warner said: "experience seems to indicate that in the United States, at the present time, private is much safer and more helpful than public outdoor relief, and indeed that the latter should usually be discontinued."[6]

Twentieth Century Reform

In the first three decades of the 20th Century protective legislation for women and children was passed, and successes were scored in workmen's compensation. But reformers failed to enact health insurance and made almost no progress with old age insurance. Modest progress was made in assistance for mothers.

In contrast to the Charity Organization Society's view that pauperism was caused by character flaw, attention now focused on economic and environmental causes.

In 1904, it was estimated that between three and four million persons—four to five percent of the population—were receiving assistance from both public and private sources.

Robert Hunter, a social worker turned economist, estimated that an additional six million persons lived below the poverty level. He also calculated there were between 10 and 11.6 million unskilled workers in the U.S. and contended that they lived below or just at the poverty line ready to be catapulted into dependency by the slightest adversity.

Hunter drew the poverty line at $460 a year for a family of five in the industrial States and at $300 a year in the rural South. He pointed out that 350,000 railroad workers earned less than $375 in the North and not quite $150 in the South. In the Middle Atlantic States, nearly a third of the labor force earned less than $300 a year.

At the 1912 Conference of Charities and Corrections, the Committee on Standards of Living and Labor recommended the following:

- A living wage, with the minimum to be established by local commissions.
- The right of every family to a safe and sanitary home with moderate rent.
- Abolition of labor for children under 16.
- Retirement for those over 65 with a pension from the industry in which they worked, with no loss of equity due to withdrawal or discharge.
- Workmen's compensation for industrial accidents and disease.
- Unemployment insurance.
- An eight-hour day for women and minors and certain groups of men, and a six-day week for all workers.

The committee justified its recommendations in part with the following rationale: "We recognize that under present conditions the heavy burdens now sustained by industrial workers as a result of unavoidable accidents, industrial diseases, sickness, invalidity, unemployment, and old age are burdens which frequently crush those whose career has been honorable and service faithful. . . . "

The committee's report was adopted, although in watered-down form, as the social and industrial jus-

Estimated Population, Amount Spent for Poor Relief, and Per Capita Expenditures, England
1834–1847
(In Thousands)

Year	Estimated Population	Poor Tax	Per Capita Expenditure
1834	14,372[a]	£6,317[a]	9s. 1d.
1835	14,564	5,526	7s. 7d.
1836	14,758	4,718	6s. 5d.
1837	14,955	4,045	5s. 5d.
1838	15,155	4,136	5s. 5d.
1839	15,357	4,407	5s. 9d.
1840	15,562	4,577	5s. 11d.
1841	15,907	4,761	6s. 0d.
1842	15,981	4,911	6s. 2d.
1843	16,194	5,208	6s. 5d.
1844	16,410	4,976	6s. 1d.
1845	16,629	5,040	6s. 1d.
1846	16,851	4,962	5s. 11d.
1847	17,076	5,299	6s. 3d.

[a] Figues have been rounded.

SOURCE: Sidney and Beatrice Webb, *English Local Government: English Poor Law History, The Last Hundred Years*, Pt. II, Vol. II, pp. 1038-39.

Classification of Persons
Blockley Almshouse
Philadelphia 1848

Total White Persons: 1,509

Children	111
Hospital and lunatic	718
Old men's infirmary and incurable section	188
Male working wards	79
Mechanics' wards	42
Old women's asylum and incurable	256
Women's working ward	71
Nursery with women	21
Nursery with children	23

SOURCE: Benjamin J. Klebaner, "Public Poor Relief in America 1790–1860," p. 211.

There were also 79 Negroes in the almshouse, including three women and ten children. The statistics do not show how many Negro adults were capable of working.

tice plank of the Progressive Party in 1912.

In 1912 the Children's Bureau was established under the Department of Labor and in 1916 goods produced by children were excluded from interstate commerce. The bureau's mission was to "investigate and report . . . upon all matters pertaining to the welfare of children and child life among all classes of our people . . . "

In 1924 Congress passed a national child labor amendment to the Constitution, but it failed to become law because the required number of States did not ratify it.

Social reformers of the day were advocating a two-part program. The first was to prevent poverty and dependency by having industry institute health and industrial safety programs and by paying a living wage. The second was social insurance against the certainty of old age, the risks of unemployment and physical incapacity, and death of the breadwinner.

Germany had been the first country to establish such an insurance system in 1884, and by 1900 every European country had some type of insurance. Between 1909 and 1920, 43 States established workmen's compensation. However, the compensation did not cover occupational disease; benefits were low and many workers remained uncovered.

In 1911 Illinois became the first State to enact a law to aid mothers, with 39 States following suit by 1926. Reformers wanted aid to needy mothers, such as widows and those who had been deserted, but to have the program administered outside the public assistance system to remove them from the stigma which was still associated with pauperism.

An opposing view was expressed by the director of the Boston School for Social Workers, Jeffrey R. Brackett: "Do I hear the challenge that such public aid to mothers is not public relief in most places . . . ' that it is in the nature of a pension, or payment for services rendered by the mothers; that it is social justice and not charity? I venture to answer that any public money expended by public officials in the homes of persons . . . is public outdoor relief."[7]

The rejection rate for aid to mothers was very high, and those who received it were assumed to need "supervision" or what was beginning to be called "casework." In addition, the assistance was universally so low that many recipients worked as domestics, took in laundry or performed other unskilled work.

By 1926 of the 40 States offering aid to mothers, eight gave aid in general, five to widows only, and the remaining 27 specified certain categories of mothers.

Reformers found tough going on another front—old age assistance. By 1929, 11 State legislatures had passed assistance programs, but legislation was vetoed in three States and declared unconstitutional in two. In most States this assistance was at local option, but between 1929 and 1933, 19 States did pass old age legislation.

In 1929 slightly more than 1,000 elderly persons received assistance for a total cost of $222,000. But by 1932 that number had increased 100 fold and 100,000 elderly persons were receiving $22 million a year.

Generally, however, reform lost its popularity after World War I and it marked time until the Great Depression spawned the New Deal and with it the Social Security Act of 1935.■

Part II of this series, "The New Deal and More," will appear next month.

Aggregate Governmental-Cost Payments for Outdoor Relief in 16 Cities, by Class of Relief, 1911-1931[1]

Year	Total	Outdoor care of poor	Aid to mothers	Aid to soldiers and sailors
		(In Thousands)		
1911	$1,559	$1,042	$14	$503
1912	1,700	1,177	53	470
1917	3,488	1,801	1,054	633
1918	3,980	1,991	1,258	731
1919	6,183	2,139	3,317	727
1923	11,640	3,205	7,450	985
1924	12,818	3,699	7,986	1,133
1925	14,709	4,671	8,825	1,213
1926	14,814	5,415	8,261	1,138
1927	17,059	6,534	9,288	1,237
1928	20,014	7,364	11,201	1,449
1929	18,989	6,733	10,543	1,713
1930	28,004	13,553	11,430	3,021
1931	64,142	42,998	15,051	6,093

[1] Data for fiscal years ending in calendar year. Data not available, or not available on a comparable basis, for the years omitted from this table.

SOURCE: U.S. Department of Commerce, Bureau of the Census, Annual Reports, *Financial Statistics of Cities Having a Population of Over 100,000, 1911-1931.*

Reproduced from Anne E. Geddes, *Trends in Relief Expenditures, 1910-1935,* p. 10.

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5. Ibid., p. 41.

6. Ibid, pp. 174, 176.

7. Jeffrey R. Brackett, "Public Outdoor Relief in the United States," Conference of Charities and Correction, *Proceedings, 1915,* pp. 448-49.

Like Mother Like Daughter

Mommy beat up daughter. Now daughter is beating up dolly. It's so easy for a child abuser to create another generation of child abusers.

How do you put an end to this grim equation? By helping both children. The daughter. And the mother.

For a free supply of this poster write: Editor, The Social and Rehabilitation Record, Rm. 5327 SRS/HEW, Washington, D.C. 20201

New SRS Administrator Talks Strategy

Robert Fulton became Administrator of SRS on June 24. In this interview, which took place three weeks before Medicaid fraud was spotlighted by the Moss Committee, Fulton outlined how he planned to deal with the major issues facing SRS programs.

THE RECORD: Mr. Administrator, welfare has for some years received at least its share of knocks from the press and the public. Do you feel this is justified in part or in whole?

FULTON: Well, I can understand the criticism. A term often used to describe the condition of our programs is the "welfare mess." And we have had serious management problems with the so-called welfare programs—Aid to Families with Dependent Children, Medicaid and social services—but to say the programs are in a mess is to overdraw the problem. It ignores the reality that millions of Americans are dependent on our programs for meeting their basic needs. And it also ignores a great deal of positive, effective management work by SRS and the States.

I think two things have created that negative "welfare mess" impression. First, we've had more than our share of problems in administration and management of our programs.

The other thing is that the program designs themselves have been evolving over a period of many years. Our mission is not the same as it was 10 years ago or five years ago or even one year ago. And in some respects, as the programs evolved so did inefficiencies and inequities. Certainly the evolution management programs and the complexity has caused misunderstanding.

THE RECORD: Are you saying you simply need a good public relations program to set the image straight?

FULTON: No, I am not. However, I do feel that what SRS needs is more in the nature of a major tuneup than an overhaul. Of course, we do need to articulate clearly to the public exactly what we are doing. For instance in 1973 we determined we had a 41 percent error rate in AFDC. Now that error rate is down to 26 percent—and the dollars involved amount to 10.5 percent of what is being spent on the program. We need to convey to the public a clearer picture of the significance of that progress.

But my first task is to make sure that the management is, in fact, good; that the program design problems are understood by our people; and problems are remedied where we can effect a remedy.

In some cases we can improve our own regulations. In others we have to seek changes in statutes. But beyond this, we need to interpret for the public as accurately as we can not only the problems and the difficulties, but what is being done about them. And we also need to present the positives—the things that we are achieving, good things that are being done in the lives of the many people who receive the benefits of our programs.

I sometimes feel that we focus so much on the problems that we have forgotten the positives.

THE RECORD: To what extent has poor communications contributed to the poor image of welfare programs—50 percent, 75 percent?

FULTON: I could only speculate about that. But I do think the welfare "image," as you put it, has been formed by a set of interacting factors. I believe we can see examples of the nature of the problem in some very simple things.

For example, unemployment benefits are very often confused with welfare. Those benefits increased $14 billion within a two-year period. During this same period growth in the true welfare program, AFDC, was nothing like that. In fact, it was a relatively modest $1.5 billion.

People hear and read about the major expansion in the welfare program, but in reality, the major expansion is occurring in unemployment benefits—benefits for working people, who are normally employed full time.

Here is another example of confusion: One of the major magazines ran an article on welfare awhile ago dealing primarily with the AFDC program. Illustrating the article was a graph which showed rising costs for the so-called welfare programs. But if you read the fine print, you discovered that the graph included food stamps and Medicaid, as well as Aid to Families with Dependent Children.

Now here's the catch. The impression left by the article was that the number of AFDC recipients is either growing by leaps and bounds or that the money each family receives is skyrocketing. In reality, what drove up the graph are the increases in food stamps and Medicaid, and much of the benefits of those programs go to people who don't receive AFDC.

Yes, I would say that a major part of the "welfare problem" is a perception problem and one that we can reduce by better interpretation and communication.

THE RECORD: Do you agree with Secretary Mathews that we don't have all the answers to the complex social problems confronting us and that we should invite input from persons outside SRS?

FULTON: I am wholeheartedly in agreement with what the Secretary is doing to open up this Department. I want SRS to be in the forefront of strategies to open communications and find new ways of having dialogue with the public and various organizations with which we work, both governmental and nongovernmental.

If we don't do this there is a very real hazard of becoming insular, listening primarily to ourselves and assuming we can design solutions which will fit many different situations. I feel the hazard is even greater at the Federal level than at the State and local levels. That's because we are farther from the people. I think we should have a greater willingness to admit that we need the counsel of people who are closer to the problems. Doing this will help keep us out of trouble, will save time, will save money and will make our services better.

THE RECORD: There was something of a milestone public hearing in Boston, your old territory, a few weeks ago where opinions were solicited from the public before SRS views were cast in the form of a proposed regulation. Is this a new trend?

FULTON: Yes, it is. We will use the "notice of intent" procedure, consistent with the Secretary's guidance, to raise issues with the public and ask them to give us input before we try to write the regulations. That will be done just as extensively as we can and the Boston experience will be valuable to us.

We learned a lot from that session which, by the way, involved a section of our regulations on assistance payments. We asked people to come in and talk with us about whether we ought to change anything substantively in the regulations or simply to repackage them and make them easier to use.

What we got were some very good comments from State people and from others both about the regulations and about how we set up the meeting.

We are going to have more such meetings on this subject as well as different types of meetings on other subjects.

THE RECORD: Turning to the programs, some say there has never been enough money in the Medicaid program at either the Federal or the State level to wage a successful campaign against fraud and abuse. Do you believe this is so and, if it is, what will you do about it?

FULTON: The problem of fraud and abuse in Medicaid and Medicare is among the very highest priorities of SRS at this time. However, I don't think the fraud and abuse problem is caused by a lack of money to wage a campaign against it as much as by a weakness in the management systems that had developed in the Medicaid program.

Many States have tried to administer Medicaid on a shoestring, from the standpoint of administrative arrangements. They have not instituted modern management methods and they have not developed the kinds of staffs needed to review and analyze what is occurring so they can take steps to curb fraud and abuse.

We are now beefing up staffs in regional offices and we have sent out headquarters-hired field teams which are performing extensive audits of potential fraud and abuse practices. One team is nearing the completion of its work in Massachusetts and will be going to another State shortly. We have also hired a second team to go into Ohio, and it will probably be there before this interview is published. We also have a number of other actions underway on the fraud and abuse front.

So, we are going to do a lot more

"Our mission is not the same as it was 10 years ago or five years ago or even one year ago."

"... my first task is to make sure that the management is good, the program design problems are understood and problems are remedied ..."

about fraud and abuse. There have been many things done in the past. However, we have concluded that those efforts have not been adequate and we are revitalizing them and expanding them considerably.

We are at the front end of a very major Medicaid management initiative, really a set of initiatives, which includes as a key element a much stronger fraud and abuse prevention and detection effort.

THE RECORD: What repercussions would occur in SRS if block grants become a reality?

FULTON: SRS programs are involved in two of the block grant proposals the President put forward early this year. The enactment of those proposals would affect the work of many SRS people. We would still have monitoring responsibilities and other management functions although the ground rules under which we would operate would be somewhat different.

One of the President's proposals involves combining Medicaid with a number of other health programs administered by the Public Health Service and putting them into a block grant for the States. There has been no decision on how organizationally HEW would administer its responsibilities should the health services block grant program be enacted, but certainly there would still be Federal involvement.

The same would be true in the Social Services program, which is the second block grant proposal directly affecting SRS. That proposal, in reality, is simply a further delegation to the States of authority for Title XX Social Services programs.

THE RECORD: The Medicaid quality control system is fully operational in only 24 States at present. Do you think this constitutes sufficient progress and, if not, how do you plan to see that the program is brought on line in the rest of the States?

FULTON: That is not sufficient progress. We are currently in contact with individual States about the Medicaid quality control effort. And we are in the process of instituting compliance actions against a few States which have made literally no progress in instituting the quality control program.

Secretary Mathews, Under Secretary Lynch and I will be talking with some of the governors and their senior assistants about the need for them to move ahead with this program.

We think it is in the States' interest to meet the Medicaid quality control requirements. Most of them see that. In some cases they have moved more slowly than either we or they wanted. We plan to keep the heat on this subject.

THE RECORD: It seems that the debate over a national health care system continues to escalate. If one is established, how will that affect SRS?

FULTON: First of all, I think a fairer word might be "percolating" rather than "escalating." It's true that the debate has continued, but not as a first priority matter on the national agenda.

Indeed, there has been less discussion of national health insurance in this session of Congress than there was in the previous two. However, I agree that the issue is still very much alive.

Many people believe that we will not be able to have adequate health care financing in this country until we get our financing systems more unified.

I believe this issue will move back on the front burner of the issue front again within the next year or two.

How SRS would be affected if we got a national health insurance bill would depend on the specifics of the bill. If we had a bill that was modeled along the lines of the comprehensive health insurance program proposed by the Administration three years ago, it would probably mean that the Medical Services component of SRS would be merged into some kind of health financing agency within HEW.

THE RECORD: Do you see the Child Support Enforcement program as one important part of the answer to the welfare problem.

FULTON: I do think that the purposes and objectives reflected in the Title IV-D Child Support Enforcement Act demonstrate an important Federal

commitment.

I also think this program enables us to better help the States assure that those parents who abandon their families and are able to provide support, do so.

This program is an important part of my responsibilities, but I should point out that it is not a part of SRS. I am involved because I wear a second hat of director of the Office of Child Support Enforcement.

I think that this program again puts our credibility on the line. The public expects the Federal and State governments to do all in their power to assure that people who have obligations to families receiving public assistance discharge those obligations to the maximum extent they can.

I believe if we can do a good job with child support enforcement, as I am confident we are going to do, that we will have an impact on public attitudes not only in this area but in the entire public assistance program.

We estimate the program will collect nearly $230 million in fiscal 1976, with the Federal share reaching $70 million. This is based on previous State experiences and the early operations of the Title IV-D program.

As time goes on, the savings will increase. We believe the program will ultimately yield $1 billion annually in collections of which about $400 million would be Federal savings.

THE RECORD: Are the States complying with the requirement to reduce error rates in AFDC?

FULTON: We have had considerable progress in reducing error rates since we started the quality control program about 2½ years ago. At that time we took our first measurement of the error rate throughout the country and found it averaged about 41 percent, and in some States it was as high as 60 percent. We have now reduced that rate nationally to about 26 percent.

But, that is a misleading percentage in itself and I should put it in perspective. When we use those two percentages we are referring to the percentage of cases in which some kind of error is made. For instance, there might be a six-dollar overpayment in one case that would count as an error. In another case someone else, who is totally ineligible, might be getting $300 a month. That would also be an error. So, when we say 26 percent of cases have errors in them, that doesn't mean that 26 percent of the dollars are being spent inappropriately.

As a matter of fact we estimate the average dollar loss from errors in the latest six-month measuring period, at something on the order of 10.5 percent. Our goal has been to reduce the case error rates to three percent on ineligibility and five percent on overpayment. We have not moved as fast towards that goal as we had hoped and we are now examining it with representatives of various levels of State and local government. There is a possibility of developing some revised standards.

We have also had a court ruling that the three- and five-percent standards were set arbitrarily and we will not be able to stick with them now in any case.

THE RECORD: Do you think the Work Incentive program has been successful or unsuccessful in helping AFDC recipients become financially independent?

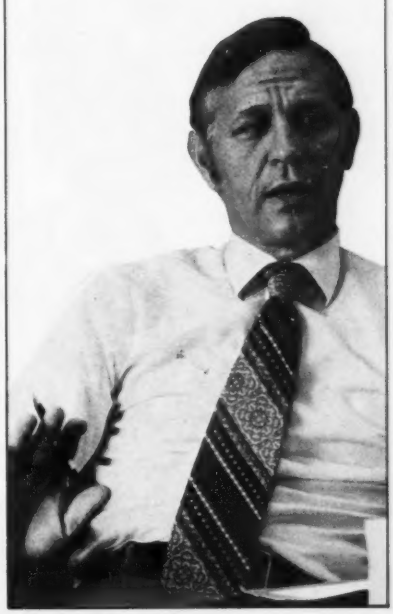
FULTON: I think that WIN can be only one part and, perhaps, even a small part of an overall effort that we must continually carry on to help AFDC recipients who can work get jobs so they can move from dependence on public assistance to independence.

The WIN program has been very successful in some areas and has not done so well in others. Right now we are exploring, as a part of our budget and legislative planning, a whole set of possible additional efforts on the work front.

I don't think one approach can provide all the answers for obtaining job opportunities for AFDC recipients. But I do want us to develop some new approaches which will supplement those we already have and, perhaps, make them better known.

THE RECORD: The Early and Periodic Screening, Diagnosis and Treatment program has been called the broadest gauged program in our history to bring health care to children.

"The problem of fraud and abuse in Medicaid and Medicare is among the very highest priorities of SRS at this time . . . the front end of a very major Medicaid management initiative . . ."



"The country should be proud, in my opinion, of what it has done with public assistance, but it should not be satisfied with what it has done."

Are you satisfied with the progress of the program?

FULTON: Well, EPSDT is a very broad program, but you may have overstated the situation somewhat. This program went on the books back in 1967, but it was slow getting off the ground. However, there has been far more activity the last two years than there was in all the previous years of the program.

We are now screening between three and four million children a year. But that's not enough because the total eligible population is on the order of 13 to 14 million. We don't have to screen every one of them every year but we will have to expand substantially beyond the present 3-4 million level. Further, we must assure that EPSDT is not limited to screening, but follows up with diagnosis and treatment, as well.

The EPSDT program is different from the rest of Medicaid because the State has an affirmative obligation to inform people that the screening, diagnosis and treatment services are available, to deliver the screening services to those requesting them and to follow up on health problems to be sure that children receive treatment.

We will continue our efforts to get that program effectively implemented in every State and in every area of every State.

THE RECORD: On several occasions you have mentioned that SRS programs are divisive. Would you explain that?

FULTON: Well, I think there are misunderstandings about the public assistance programs in this country.

I guess I would say the divisiveness is around or about our programs, rather than the programs themselves being deliberately divisive. They certainly are not and were not intended to be divisive.

SRS programs tend to be controversial because of some of the things I mentioned earlier—the management problems, inequities in the way our programs and other related programs impact the various groups in our society, the view that our programs help promote family breakup, that we sometimes have people receiving benefits who are not eligible for those benefits.

I want to use all the energies, imagination and insight that I can to help assure the American public that the bulk of our program resources are being well administered and are providing important support in the lives of the people that are receiving the benefits.

The country should be proud, in my opinion, of what it has done with public assistance, but it should not be satisfied with what it has done. But we have certainly made a major commitment in comparison to what we did in the 1930s and even much later than that.

I would like to see the day in this country when people receiving public assistance are not viewed as being somehow unworthy. I would like to have them viewed by their neighbors as worthy individuals who are, at that particular time, in need of assistance and deserving of it. It is a long-term process and it is not one that we can wave a magic wand and change public opinion.

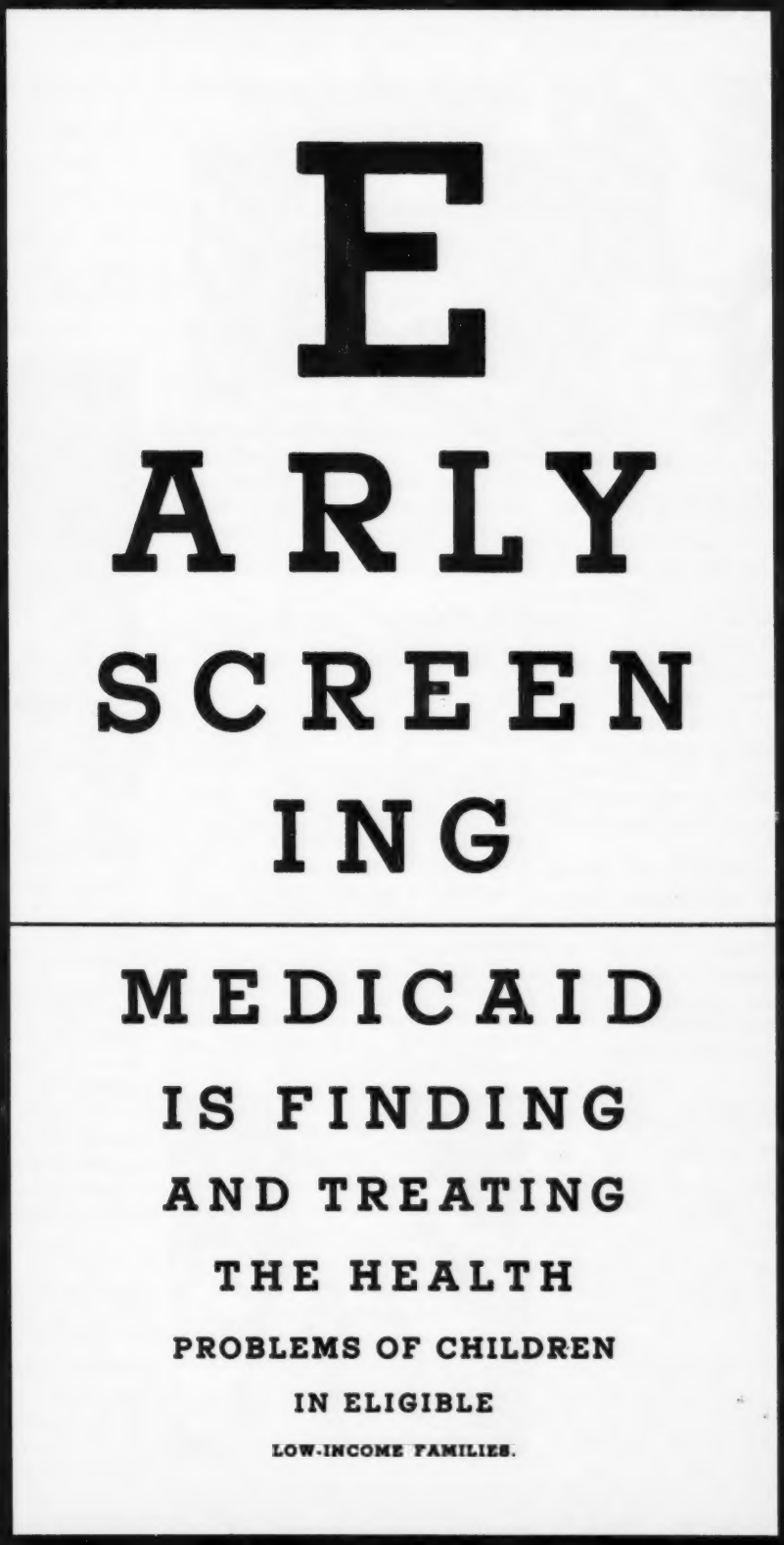
However, I think the public administrators who have responsibilities for these programs can make significant contributions towards that end.

THE RECORD: Would you describe in a few words the general mission of SRS?

FULTON: I think I just did in part. But, essentially, I think our mission is to deliver assistance to the categories of people that Federal laws have identified as needing support through AFDC, Medicaid and Social Services.

To that end, we must effectively manage the resources for which we have trusteeship and assure that the benefits get to those qualified. Beyond that, however, we must work for program improvements, identify areas in which our program designs should be changed and seek to have those changes enacted or incorporated in regulations.

So, I suppose we are back to your first question—the challenge of managing in accordance with the Federal law and existing regulations and policies, and then working for improvement in those areas where we see the need for that. ■



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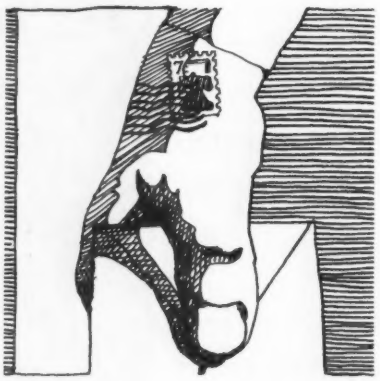


Taking checks to the people

Pennsylvania is modifying its nationally acclaimed delivery system for welfare check distribution through banks—because there are some neighborhoods where there are no banks. In such instances, recipients will pick up their checks at district welfare offices.

The system has been tested for six months, and State Welfare Secretary Frank Beale plans to expand it depending on the amount of stafftime available in the welfare offices.

Pennsylvania pioneered the delivery of welfare checks through banks and is operating this system in cities throughout the State.

Today more than 129,000 cases—42 percent of the caseload—receive checks at banks for an annual recurring savings of about $8 million.

AFDC and Medicaid fraud are subject of study

A study of State efforts to control fraud and abuse in the Aid to Families with Dependent Children and Medicaid programs is being conducted by the General Research Corporation at McLean, Va., under an SRS contract.

The corporation has mailed questionnaires to all States and the District of Columbia to collect baseline data on such activities as detection, investigation, administrative sanctions, referrals for prosecution, and efforts to gain restitution, including recipients, providers and agency personnel.

Survey teams are currently interviewing the staff of State programs to accumulate statistical and factual information about their program.

The expected completion date of the study is March 1977.

NJ reinstates AFDC-UF

In an effort to raise the living standard of families with fathers who are unable to find work, New Jersey has reinstated the unemployed father segment of its AFDC program.

Since this segment was dropped five years ago to help ease the State's financial crisis, these families have been covered by a program financed by the State and local governments. Payments were two-thirds of that available to AFDC families whose fathers were absent.

100,000 calls are logged by food stamp hotline

With only about half of those eligible for food stamps buying them, the Wayne County Department of Social Services instituted a food stamp hotline for those seeking information about eligibility standards, verification requirements and where to apply.

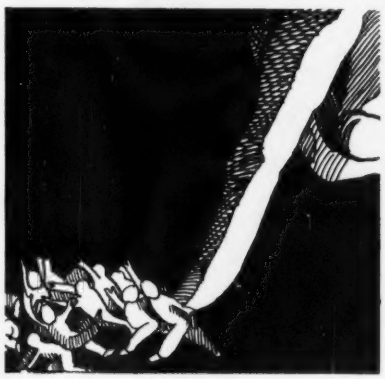
Tallies for the first year of operation, 1975, show 100,000 calls were received.

There are about 687,000 persons participating in the food stamp program in Michigan, according to Mike Cirrito, coordinator of the food stamp outreach program.

Welfare medical fees ruled matter of public record

Payments by the Connecticut Welfare Department to private physicians who treat welfare patients must be made public according to the State Freedom of Information Commission.

The Commission's ruling was in response to physicians complaints to the Social Service Commissioner about their fees being published in the newspaper. The physicians contendedthat it constituted an invasion of privacy.



Big Apple's money crunch felt by day care centers

The 49 day care centers in New York City that received a temporary reprieve on their loss of funds from the city July 1 have lost their fight to remain open.

The U.S. District Court that delayed the closing said that the city's Agency for Child Development substantially complied with the court's instruction to hold a public hearing before cutting off funds.

The move to terminate funding was part of the city's effort to trim costs by consolidating its day care programs.

An appeal is pending before the U.S. Circuit Court of Appeals.

Pennsylvania says thanks to welfare volunteers

More than 72,000 volunteers, who put in a half-million hours on programs for the State Department of Public Welfare last year, were recognized during the State's Volunteer Week.

"It would be impossible to put a price tag on the services provided by our volunteers who bring concern, friendship and an extended lifeline to those in mental hospitals, schools for

the mentally retarded, young people in youth development centers and facilities for older people," said Frank S. Beal, Secretary of the State Department of Welfare.

Career opportunities

Arizona's Bureau of Aging is seeking a chief to administer the statewide program. Additional opportunities in other program areas are anticipated as a result of the State's expansion of services to children and the elderly.

Send inquiries to Arizona State Personnel Division, 1831 W. Jefferson, Phoenix, AZ 85007.

The Record invites notices of top-level appointments and news of State and local activities of interest to other professionals. Contact Patricia Fells, assistant editor.

People

Edith Elmore, director of Public Assistance for the Tennessee Department of Human Services, has retired after more than 40 years of service with the agency.

Dr. Robert 'Shea' Bonshag has been appointed director of the Bureau of Medical Assistance, Michigan Department of Social Services. He was formerly director of the Health Services Review (public health division) of the Michigan Department of Health.

Fred W. St. Clair has been appointed commissioner of the Mississippi Department of Public Welfare. He was formerly executive director of the Mississippi Optometric Association and served as chairman of the Statewide Health Coordinating Council.

Floyd Brandon has resigned as SRS Regional Commissioner in Region VI (Dallas). After three years of service in the regional office he is moving to a position in private industry.

Letters to the Editor

WIN article termed winner

To the Editor:

My staff and I have recently read the article in the Social and Rehabilitation Record, Volume 3, Number 3, entitled, "Are We Prescribing the Wrong Medicine for Social Ills?" and find it outstanding.

We would like to use excerpts from this article for future WIN training seminars as we feel it would be of great value to WIN staff statewide.

We are anxious to share it with California WIN staff.

Elinor Swift
WIN Program Supervisor
Sacramento, Calif.

To the Editor:

The article by Mr. Maurice Marsolais, "Are We Prescribing the Wrong Medicine," in the Social and Rehabilitation Record issue of June 1976, must surely rank as among the most instructive articles it has ever been my pleasure to read.

As a Federal Representative serving the greater Detroit, Michigan area, I have certainly seen the often deleterious results achieved because of employment and training programs hastily contrived, fundamentally contradicting, or based on naive, if not altogether misdirected assumptions.

One must hope that such articles as Mr. Marsolais has written—will be carefully assimilated by such executives as may take office in the impending days ahead—so that some of our national problems may be more efficiently addressed.

Julian P. Greer, Jr.
U.S. Department of Labor
Chicago, Ill.

Day care putdown is put down

To the Editor:

I was deeply troubled by Suzanne Woolsey's abrupt put-down of day care in her article "Day Care Centers Are Nice, But Who Really Uses Them." It seems that she writes from behind the piles of journals and researchers' opinions, but not as a person who has experienced day care first hand from any point of view.

I see our day care center not as an "arrangement" or "a way to cope with the child-care problem," as Woolsey seems to put it, but as a place sought out as a source of strength and support to developing young families. We see ourselves, not as a band-aid solution of where to put the kids when going off to work, but as a place that can be responsive to the needs and adjustments of a family in which parents work.

Often, one of our first jobs when a new family enters the center is to help the parents deal with the sense of guilt they have been made to feel because they have to or want to go back to work. I think that the preference for home care that Woolsey assumes on the part of parents is in many cases a result of carrying this burden of guilt.

Woolsey asks whether it is worth it for children's sake, and answers that there are no "significant developmental gains" in the children. It is not that I question the validity of her answer, but I wonder about the focus of her question and the focus of much of the research that has been done in the name of evaluating day care programs. What is most important to those of us who are providing and using day care is the gains in family strength, the gains in the child's knowledge of him/herself, his/her expressiveness, curiosity, and feeling of self-worth.

Paula L. Wehmiller, Director
Trinity Cooperative Day Nursery
Swarthmore, Pennsylvania

Cash register courtesy of Turk s Head Bazaar Chadds Ford PA

Stopping Welfare Fraud

by Patricia Fells, Assistant Editor

Keeping the wrong hands out of the public till—and making sure the right hands don't get more or less than they are entitled to—has been a continual problem, though not as big as popularly thought, since AFDC began.

A much bigger problem, of course, has been finding ways to discover and correct errors made inadvertantly by both public assistance workers and recipients. And a massive Federal-State quality control program is attacking that.

But while suspected cases of fraud are referred for prosecution in only one percent of the 4.3 million cases involving Aid to Families with Dependent Children, fraud is an area that is far from being overlooked at any level of government.

Florida, Illinois and a county in New Jersey are among those who have developed successful techniques for curbing fraud. Their techniques follow:

The speed of a computer and a beefed-up investigative team helped convict 1,748 welfare cheaters in Florida during the last fiscal year. They were cheating the State and the Federal Government out of nearly $2.5 million.

This was the biggest catch since the first net was thrown in July 1972. From that time until June of this year the 79-man Division of Public Assistance Fraud has helped convict about 2,978 persons who defrauded the State and the Federal Government out of nearly $3 million.

This remarkable success is due to the unique partnership formed by legislative, executive and judicial branches of the State government.

In 1972 the legislature charged a legislative officer, the Auditor General, with the responsibility for investigating fraud. The Auditor General formed the Division of Public Assistance Fraud and began investigating cases referred by the State Health and Rehabilitation Service. Because of the thoroughness of the investigation and preparation of cases, the State's attorneys began accepting considerably more cases for prosecution. And for the past four years 90 percent of the cases brought to trial have received convictions.

Ferreting out the discrepancies would not be possible without an intricately constructed system. And as the Division Director Billy Davis points out, "It takes a complex system to manage the 78,895 cases."

Florida's record of curbing welfare cheating is based on the successful meshing of three independent operations. But while the system is computerized, the process still begins with the eligibility worker.

The detection process begins when an eligibility worker in the Health and Rehabilitation Service receives a computer printout from the State Department of Commerce of the recipients' wages, unemployment compensation and workmen's compensation. This is compared with the information supplied by the recipient on his application for assistance.

If an overpayment or discrepancy is spotted, the worker tags that case as a possible fraud. At this point the regional Overpayment-Over-issuance Fraud and Recoupment Unit is notified. This unit then does a desk review of the case to determine if it is possible fraud or if an error has been made by the agency. If the suspicion of fraud is substantiated,

National Box Score

From 1974 to 1975 the number of AFDC cases challenged for suspicion of fraud rose 30.5 percent to 144,306 cases, according to the National Center for Social Statistics.

Of these, 80,974 were judged by the local offices to have sufficient evidence to support a charge of fraud. About 39,650 cases (49 percent) were referred to law enforcement agencies and reimbursement was arranged from the recipient in 5,570 of these cases.

Of the remaining 51 percent, 27,425 were handled through administrative action and reimbursement was arranged in 58.2 percent of the cases. Action was pending on 13,894 cases when the 1975 survey was concluded.

the case is referred to the Division of Public Assistance Fraud. If the division determines, too, that the case is probably fraudulent it prepares a fraud referral package for the State Attorney.

This packet resembles a lawyer's trial brief and contains:

- A letter of referral.
- An affidavit stating the nature of the charges and evidence.
- The investigator's report.
- A list of witnesses to support the allegations.
- An index of enclosures of supporting documents.
- A complete set of the documents necessary to support the charges.

In addition to catching people who have illegally received $3 million in the past four years, the campaign has also been a deterrent to fraud. Says Director Davis: "Before this system went into effect, some welfare applicants thought they could tell the welfare department anything and collect. Now, with this system, they are reluctant to lie for fear of getting caught."

This time "dialing for dollars" took on a different meaning. Those dialing the toll-free number were concerned citizens. And the voice on the other end was recorded.

Since mid-1975 residents of Illinois have been dialing more than 1,000 calls a month to report suspected welfare fraud. In some cases payments were found to be too high and were reduced. In others, recipients were discovered to be ineligible and were removed from the rolls. To date over 100 major welfare fraud cases totaling more than $500,000 have been referred for prosecution.

The total cost of the toll-free telephone operation was about $6,000 the first year.

Simplicity is the keynote to this fraud deterrent scheme. The caller simply dials the toll-free number and a recorded message assures him the caller will remain anonymous if he wishes.

The caller is then asked to describe the nature of the complaint and give the suspect's name, address, age and his employer. If the caller does leave his name and address, he receives a letter of appreciation within a few days.

Tapes of the complaints are reviewed by an investigator who decides if the case should be assigned for an immediate check, routine investigation or if no action should be taken due to inadequate information.

When a case is referred for further investigation, the caller's information is buttressed with information from other sources such as computer data, interviews with the regional caseworker, review of the recipient's file and inquiries of other Federal, State and local agencies. From this a decision is made to seek restitution for the excess payments, prosecute or drop the case because of inadequate information.

James S. Bailey, assistant to the Director, Illinois Department of Public Aid, points to two factors that have set the hotline off to a ringing start.

Early in the program, over 500 Illinois law enforcement officers received a letter introducing the hotline and urging their cooperation. Surprisingly, many calls are received from police officers. Each call from an officer receives a response within 24 hours.

Another factor behind the hotline's success was the saturation public information program that introduced it to the public. Radio stations carried 30-second public service announcements and TV stations cooperated by programing an announcement and slide presentation into their public service time. Newspapers received a news release which generated both news and feature articles.

For eight years the welfare department of New Jersey's Essex County has advertised for the public to turn in suspected welfare cheaters. And they have.

In the first half of 1975 the ad campaign resulted in 212 letters and telephone calls and resulted in 88 investigations. This was an increase over the same period in 1974 of 69 responses and 14 investigations. The cost of the ad campaign is measured in the hundreds of dollars, but the savings in taxpayers' dollars tally in the thousands.

But the greatest benefit of the ad campaign is in prevention, according to the man who began it, County Welfare Director Philip K. Lazaro.

"The primary objective of our anti-fraud activities is prevention by serving notice to the community that we want to try to catch welfare cheaters," says Mr. Lazaro. "Like sin, there will always be cheating. And like the tide, fraud will rise and fall in relation to our ability to

identify, investigate and refer suspected fraud to law enforcement agencies."

Mr. Lazaro has been responsible for a number of innovations in his war against fraud. In 1963 his investigators began visiting homes of recipients to, as he puts it, "make sure the building and children were there."

"In those days we received static from HEW which referred to our checks of the home as an invasion of privacy. Now it's the reverse."

Mr. Lazaro also created an internal spot check unit which reviews and verifies 25 percent of the welfare cases annually. This process was later adopted statewide. As part of the department's internal controls, Mr. Lazaro began the practice of dividing responsibility for processing applications and verifying eligibility factors between two staff members who work independently of each other.

Another antifraud measure which was begun 20 years ago by the department and has recently caught on elsewhere was asking recipients to endorse their checks under the printed statement: "By endorsing this check, I state that the person or persons whose support is included in this check are still in need of assistance. I further state that I have reported to the County Welfare Board all earnings, income, property and resources which affect this payment. I also agree to report immediately to the County Welfare Board all earnings, income, property and resources which affect this payment. I also agree to report immediately to the County Welfare Board any change in circumstances, finances, employment or resources."

More recently, Mr. Lazaro has developed or helped develop programs to identify unreported income by computer crosschecks of the agency's caseload with the State's Unemployment Insurance Benefit file, payrolls of the city, county and State governments and federally-funded programs. There is also a check with schools to verify if children are in the home.

When Mr. Lazaro received permission to compare his caseload with the Unemployment Insurance Benefit file, a test was run on the file for the previous 24 months. An average of 80 unreported cases a month were discovered.

The crosscheck with the county payroll uncovered 23 persons illegally drawing welfare while employed by the county. It also identified 19 persons who failed to accurately report their income.

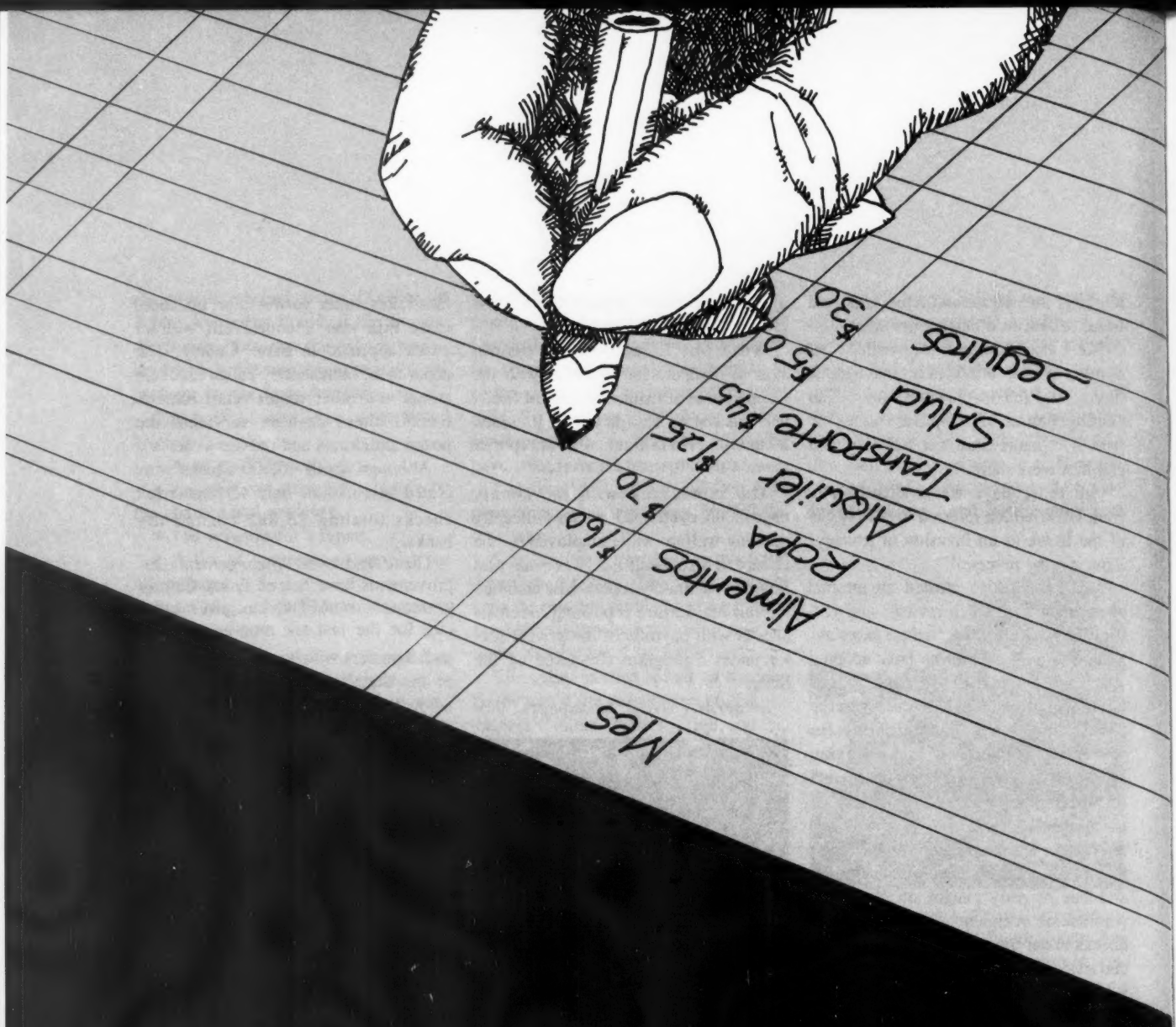
Now Mr. Lazaro is pushing for crosschecks with payrolls of the private sector under a program structured by the State.

Sometimes saving the taxpayers' dollars takes other forms. For instance, early this year a counterfeit welfare check appeared in Essex County. The department immediately called all chain stores and other major retail outlets, banks, check-cashing services, the postal authorities and the news media.

Although about 40,000 checks were issued that month, only 18 counterfeit checks totaling $6,882 cleared the banks.

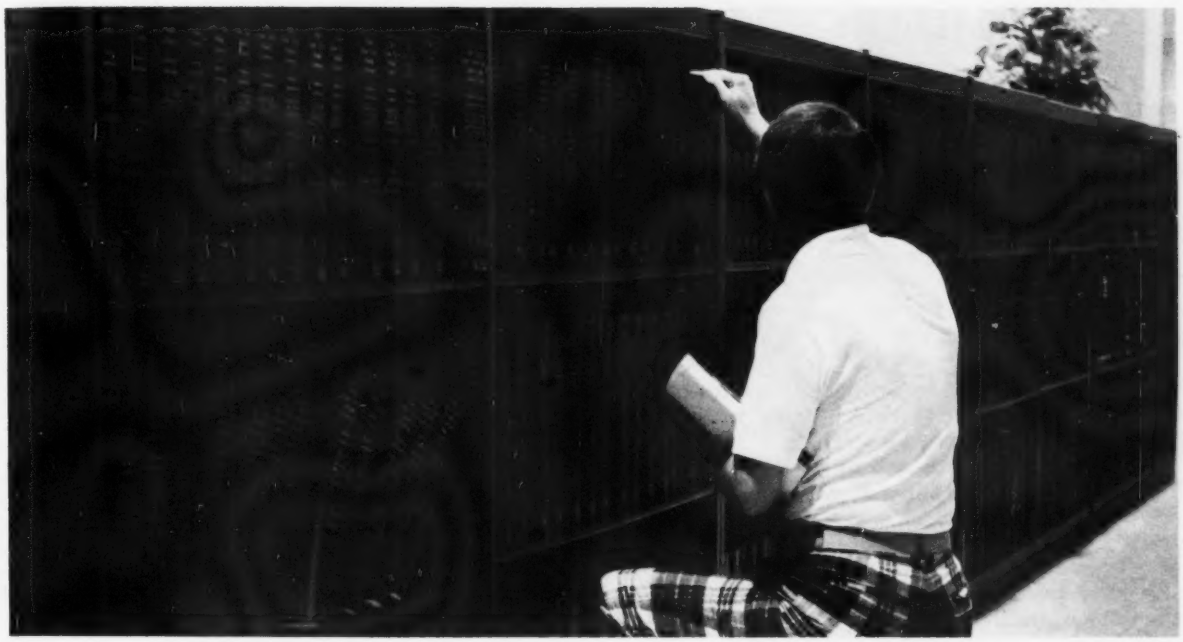
These and other management improvements have helped Essex County to reduce its AFDC ineligible error rate for the last six months of 1975 to 2.3 percent which is about 60 percent of the State's ineligible rate and well below the national norm.■

Fraud
Welfare frauds are a drain on tax dollars.
Those who secure welfare to which they are not entitled can be stopped with your help.
If you know someone who receives aid to which he is not entitled, don't just tell your friends; write to
ESSEX COUNTY WELFARE BOARD
P.O. BOX 952
NEWARK, N.J. 07101



"¿A dónde se me va el dinero?"

Averigüe cómo puede hacer mejor uso de su dinero preparando su propio presupuesto. Vea cómo es posible entender mejor de dónde le llega el dinero y en qué lo gasta. Pregúntele a su agencia local de servicios sociales. (Un "servicio de ayuda" bajo el programa WIN)



Legal Research Service Helps Increase Child Support Payments

by Patricia Fells, Assistant Editor

In Boston an unwed mother is receiving partial support from her son's father who left the city denying paternity.

A Rochester mother with a handicapped infant daughter is receiving almost two-thirds of her daughter's support from the child's father who left home for New York City to find a better job. He found the job, but never corresponded with his family or sent money home.

A family of three in Little Rock is now receiving half its monthly support from the father who deserted them to live in Chicago.

Four out of five families that are receiving Aid to Families with Dependent Children do so because a parent—usually the father—has deserted and is not paying support.

Before August of last year these three fathers and thousands like them would probably never have been located, much less encouraged to support their families.

But in the last year, child support collections have risen substantially as a result of the new Child Support Enforcement program. Assisting with the program is a national research and information service operated by the National District Attorneys Association.

This service, operated under a contract with HEW's Office of Child Support Enforcement, offers technical and legal assistance.

The association maintains a library of nearly 200 books and journals on child support enforcement and employs two full-time law interns to research questions.

A typical question is: Does the new Child Support Enforcement law conflict with the Privacy Act? The answer comes in the form of a detailed memorandum within several days showing why it does not.

When a question is asked that cannot be answered with the information on file, the association draws on its outside resources which include law school faculty, prosecutors, Federal and regional social services and welfare personnel.

If the problem is complex the inquiring agency is put in touch with a consultant. If necessary the consultant will travel to the agency needing help.

All of these services are free to State Child Support Enforcement agencies, local prosecutors, welfare workers and others involved in child support enforcement.

The association also regularly publishes trends and reviews of significant cases.

Agencies needing answers quickly can dial a hotline number. Of the 85 calls received each month about 80 percent are about procedural matters. The two procedural questions most frequently asked by State officials are how to garnishee military and civil service salaries and how to qualify for Federal reimbursement.

Questions should be addressed to the association at 1900 L Street, N.W., Washington, D.C. 20036. The hotline number is 202-872-9513.■

John Twohey—*The Washington Post*

Breslin Makes A

Jimmy Breslin's views on welfare, which first appeared in The Washington Post, *do not necessarily represent those of the Department of Health, Education, and Welfare.*

In Northern Ireland, it is said of the Irish Catholics that they are dirty and that they are too lazy to work and too ignorant to learn and that they drink anything in a glass and steal anything not nailed down and that they live only for the brew, the dole, the welfare check and that if you give them anything over that, they rush out and gamble it away. And, of course, the men run away from the responsibility of children and leave a matriarchal society.

And you stand here in the cities of this country and see crowds of blacks standing on street corners and hear the members of the majority say of them that they are too lazy to work and too ignorant to learn and that they drink anything in a glass and they live only for welfare.

At a time like this, and with this topic of race in front of us . . . . and race is the paramount issue in this nation at this time, the only issue that threatens our structure as a nation . . . . at a time like this, I can rely only upon what I have learned from the little of life I have lived.

One night, in Derry City, in the Bogside, the British troops were under a heavy rain of thrown bottles and stones and they became quite cranky. The troops lined up in a football formation and came racing down the street at the crowd. It was obvious to me that the troops were going to issue major beatings. I promptly fled. Despite my bulk, fear gives me a truly impressive running action. I was racing round a corner when three men sitting high up on a wall called to me.

They said, "Are you Breslin?"

I answered yes.

es A Point About Welfare Programs

They called down to me, "Well, we're the Breslins from the Bogside. Come on up."

Looking at the three of them, a grandfather, his married son and a grandson, who was about my age, I could see there must be some intertwining of roots because of similar facial characteristics. Looking at the one Breslin closest to my age was the same as looking at myself in the mirror.

And then they were up on the wall in my favorite position during a time of danger: situated well above the battle.

And they were drinking. As their contribution to Irish freedom they had, during the night's rioting, stolen several cases of beer. So I climbed the wall and watched the troops rush by below.

And in speaking to these three Breslins over the rest of the evening, I learned that there had been one job in the family in three generations—grandfather, son and grandson. One job in three generations and that was as a laborer at a United States Army base in Northern Ireland in 1944.

Aside from that one short period, the Breslin family has been on welfare—hard core welfare recipients.

I said to the one who was closest to my age, "Look, there's an American plant or two outside town. Perhaps I can maneuver one of the bosses there for a job for you. Meet me tomorrow morning at 9:30 outside the City Hotel and we'll go down to the plant and see about a job."

As I spoke to him about a job, a thin film of perspiration formed on his forehead. And at 9:30 the next morning he was not in front of the hotel. I found him at four o'clock that afternoon, standing on the street corner smoking cigarettes in the rain. He said he had a virus.

I said, "Fine, make it tomorrow morning at the same time, 9:30."

And at 9:30 the next morning, he was not at the hotel again. I found him that night at the dog track, and he said that he had not met me because he had a chronic back injury which had flared up—which suddenly became cured upon the sight of a bookmaker who would issue credit. He raced away from me towards the bookmaker. I decided that he had a social disability which impeded him every bit as much as a broken leg prevents us from walking.

With no background of work anywhere in his family, with no experience or knowledge of normal life, he was frightened by the prospect of keeping an appointment for a job. Just an appointment rattled him.

He was not in this position because the people before him chose to be on welfare. He was in this position because it was official policy in Northern Ireland for hundreds of years to deny opportunities for employment to as many Roman Catholics as possible, thus keeping the Catholics far from any chances of political power.

As I stood in Derry, in the Bogside, I thought immediately of the city of Detroit. In 1967, there was a major racial disturbance in the city. Flying over the city on a Sunday night, I thought the place looked like the American Dresden.

When those riots subsided, the political officials and business leaders of Detroit got together and said they would end the conditions that produced the riots. They would go along Twelfth Avenue and sweep up all the blacks from the street corners and put them to work on the auto assembly lines. "Operation Detroit" they called it. And on the first day, with television cameras and bands blaring they loaded up the buses with people from the street corners of Twelfth Avenue. Nobody from Twelfth Avenue got on a bus smiling.

At midmorning the first day on the job, one of the new men noticed a door open. The door led to the outside. There was nobody to stop him from going. And he went.

After the luncheon break, a few more were missing. At the end of the first day, it was apparent that several more would not return in the morning. And at the end of the first week, with everbody being paid, on the Monday that followed, the buses from Twelfth Avenue were half empty.

Soon they were bringing them from Twelfth Avenue by station wagon. And the entire operation dissolved and people were in despair.

Then the social scientists moved in. They said, "Perhaps there is something in black experience . . . . in the African experience . . . . which prevents these people from being able to work."

Well. After seeing my own kind, the Breslins, in action in Derry, I came home and contacted Jerome Cavanaugh, who had been the mayor of Detroit at the time of the riot. I said to him, "Jerry, don't feel so badly about the blacks on Twelfth Avenue. Wait until you see your own kind in action. You couldn't get a Breslin to take a job in Northern Ireland if you put a machine gun at his back."

What it comes down to is that you cannot muck about a race of people—black or white—for 300 years and then expect them to be able to perform normally.

And so, it becomes all the more our duty to recognize the moral obligation we in this country have at this time.

I say to you: Do not obstruct. Do not give comfort to those who do obstruct.

Polite meaningless words shall not excuse our actions.

For the path is clearly defined. The fog has been burned away.■

Seeing is believing.

He will never find the answer if he can't see the problem.

If your child needs glasses, the Medicaid Program can provide them. Just as we provide immunizations against polio, whooping cough, and measles . . . treat anemia, TB, and sickle cell disease. To find out if your family is eligible, contact your local Social Service or Welfare Office today.

Medicaid. Worth looking into.

Publications and Films

Inquiries about publications and films should be sent to those who produced them.

Publications

1974 Statistical Profile of Public-General Hospitals. American Hospital Association, Department of Order Processing and Office Services, 840 N. Lake Shore Dr., Chicago, Ill. 60611. $3. 54 pages.

Public-general hospitals in the United States play an important role in many areas of health care. Among the fields in which these hospitals have critical responsibilities are primary care in urban areas; health care services in rural, one-hospital counties; and teaching of physicians, nurses, and other clinical specialists. Yet data on the size, nature, and scope of public-general hospital operations are often difficult to find.

The *1974 Statistical Profile of Public-General Hospitals*, the third edition of a reference work published by the American Hospital Association, provides 24 detailed tables and descriptive material about the contributions of public-general hospitals. Using the most recent data available from the AHA Annual Survey of Hospitals, this book provides in-depth information on utilization, financing, personnel, teaching programs, service in single-hospital counties, primary care, and many other facets of public-general hospital service. Another feature of this latest edition is an extensive statistical analysis of the changing role of the public-general hospital in the U.S. over the past several decades.

The Economic Status of Michigan AFDC Families: An Analysis of Income and Benefit Receipt. Michigan Department of Social Services, Lansing, Mich., 48926. Publication No. 283 (4/76) $5.

The extent to which welfare recipients receive benefits from more than one income transfer program is the subject of this study. The study draws two conclusions.

First, almost all AFDC recipients receive income or benefits other than the monthly cash payment. In a given month, only one AFDC household in seven receives the AFDC grant alone. Six cases out of seven receive income or benefits in addition to AFDC, such as Medicaid, food stamps, emergency assistance, public housing, child care or their own earnings.

Second, multiple benefit and income sources raise virtually all Michigan AFDC recipients above the poverty line, and about half above the "Lower Consumption Budget" level established by the United States Bureau of Labor Statistics.

Nursing home care

How and when should you choose a nursing home? What kinds of nursing home care are available? When visiting a nursing home what do you look for?

These are some of the questions answered by this brochure, which is designed as a guide to evaluating the services and facilities of a nursing home. Included is a seven-page checklist of important questions to ask when visiting a nursing home.

Copies are available without cost in bulk from the Social and Rehabilitation Service, Publications Distribution Office, Room G115-B, MES Building, SRS/HEW, Washington, D.C. 20201.

Management Practice in Social Welfare: An Annotated Bibliography. Rino J. Patti and Phillip Osborne. Council on Social Work Education, 345 E. 46th St., N.Y., N.Y. 10017.

This bibliography concentrates on administration that is specifically related to social agencies. It also explains social welfare institutions and the forces that shape their direction and growth.

The general subject areas are:

- Administrative Leadership
- Agency Boards
- Agency-Environment Relationship
- Budgeting and Fiscal Management
- Case Materials
- Decision Making, Planning, and Change
- General References
- Personnel Management and Coordination
- Program Monitoring and Evaluation
- Staff Development

Dimensions of Social Welfare Policy. Neil Gilbert and Harry Specht. Prentice-Hall, Englewood Cliffs, N.J. $9.95 hardbound.

This book provides the professional welfare policy analysts with the kind of basic analytic framework high school and college journalism teachers offer to aspiring journalists. They have constructed the framework with the basics: who, what, where, when and why.

The authors carefully avoid any prescriptions for social welfare policy, focusing on the decision and choices which enforce the course or plan of actions. They stress identification of alternative choices, clarify options, and suggest probable consequences of alternatives.

Teaching for Competence in the Delivery of Direct Services. Council on Social Work Education, 345 E. 46th St., N.Y., N.Y. 10017. $3.50.

Games Social Work Educators Play in Teaching Practice Theories is the title of the introduction to this book which is composed of articles that offer insight into a broad range of areas about teaching social work practice. The chapters include: Preparing for Practice: Field Experience and Course Work in the Undergraduate Social Work Program; Evaluating Time and Achievement in a Social Work Practicum; Human Functioning as an Interpersonal Whole: the Dimensions of Affect, Behavior, and Cognition; and Technology and Social Casework: A Review of the Literature.

An Evaluation of the Effects of Decentralization on the Delivery of Income Maintenance and Social Services. Conducted by the University of Maryland, School of Social Work and Community Planning.

Decentralization of Baltimore's Department of Social Services has resulted in services which are more convenient for the recipient and more quickly provided by the staff. Recipients are more likely to be aware of the agency and its services, and to experience more humane treatment in both seeking and using the services.

Other benefits for recipients flow from staff's increased understanding of the recipient environment and their ability to assist recipients in appropriate use of other community services, and greater responsiveness and appropriate services rendered those referred by other agencies.

However, these benefits have been accompanied by some administrative management problems. There is a need to establish a management system to insure control of the decentralized operations in order to guarantee services to recipients that are consistent with the spirit and letter of the law.

Helping the Hopeless

How physically and psychologically battered children were helped toward better lives.

by William H. Raiford

The deck was stacked against the Juvenile Protective Association of Chicago when it launched a project to demonstrate that families living below the lowest rung of society's ladder can be rescued and helped to reach a decent level of existence.

To find participants for the program, social workers visited homes in impoverished areas. What they found was that families qualified all too easily. They had seen problem-ridden households before, but none-the-less they were surprised by the staggering constellation of problems which perpetually faced these families.

The broken furniture and sometimes human filth which littered the homes were but shadowy manifestations of the occupants' mental condition. Child neglect and abuse, the deciding element in qualifying for the program, was rampant and chronic. In some cases this abuse took the form of sexual molestation of children by their parents.

Both parents and children had severe problems. Seven fathers were alcoholics. One mother was mentally retarded; six were psychotic. Mothers often related to their children as peers, some breaking their children's toys if they disobeyed.

Several of the teenage girls were prostitutes, and many children were so violent or emotionally retarded there was no hope of placing them in foster homes. Generally, members of the families were in constant conflict, which frequently ended in one or more being injured.

There was no evidence these families had ever known a better life, and it was almost certain that the children, providing they survived the home and street life, would end up in jail or some other type of institution.

Reversing the Pattern

But nearly all managed to escape from this snake pit existence. In a follow-up study four years after the project ended in 1971, the 13 families that could be contacted were found to have "maintained family relations on a higher level without regression. In those families in which one or both parents were maintaining homes at the close of the project, there had been consistent stability and improvement in household management.

Of the 10 boys who had received extensive educational therapy, several had finished high school and had jobs, and none had been involved in delinquent activities during the past four years. This absence of delinquency was particularly significant since the boys were well known to juvenile authorities before joining the project. All the older girls, with one exception, finished high school as did other boys who participated in the center's group programs.

The younger children, most of whom had been in the day care program, were all attending school and, for the most part, were doing well. While several of the children continued to have some emotional problems and required treatment, their families were cooperating and the children were making progress.

The cost of the project, which lasted from 1965 to 1971, was one million dollars. It encompassed 60 adults and 162 children who were characterized by pervasive and chronic dysfunction in every area of their lives. The families were selected from referrals by community agencies, with no referral rejected because the problems were too great. The project was initially financed by a grant from the Children's Bureau and later by the Community Services Administration of SRS.

Since these families had lived under such depraved conditions for such a long period of time, it was determined that a massive and protracted effort was required if their pattern of life was to be changed.

Because the families often left untapped the normal medical and social services for which they were eligible, it was decided that these services must be tightly coordinated to assure comprehensive delivery. This necessitated establishing a center which was known as the Bowen Center. The services offered were: casework and family

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William H. Raiford, who was formerly involved in youth programs, is a freelance writer. He heads the public relations firm of Abbot, Connley and Finch which is based in Memphis.

counseling, day care, homemaker service, temporary shelter, foster care, emergency financial assistance, educational therapy, assistance in obtaining health services, group work and transportation.

The center's staff was composed of a director, three caseworkers, a group worker, a day care supervisor, a nursery school teacher, two childcare workers, a foster mother, two homemakers, a research director, a janitor-driver, a cook and secretarial staff. In addition, the staff could draw on consultants in various fields. When the project became fully operational during the second year, six VISTA volunteers were added.

Project objectives

From its more than 60 years of experience (see box) the association realized that the children could make no real, lasting gains unless their parents were also helped to achieve a higher level of functioning. Therefore, the following five objectives were established:

- Develop and deliver a range of interventive services to both parents and children.
- Help the parents function well enough so their children can remain at home.
- Enable the children to develop by providing supplemental parental services and corrective experiences.
- Determine factors which contribute to adequate ego functioning as well as those which "limit such realization as a prerequisite to the design and delivery of interventive and preventive programs."
- Develop methods of helping parents and children with severe emotional and social problems, which may be adapted to other settings and programs.

A sixth objective might have been to let the needs of the families determine the nature of the services as well as the techniques for their delivery. This was one of the guiding principals of the project. As the official report of the project pointed out, "It was natural for staff with previous experience to turn back to old and familiar solutions in the face of new problems. It took considerable conviction . . . to maintain a position against rigid structures, pat answers . . . "

Family characteristics

Of the 35 families, 15 were white, second generation Chicagoans. Eleven were from Appalachia and had arrived in the city within the past seven years. Six were black. One family was Puerto Rican and one of the parents in each of three other families was Mexican. The parents of 13 children were in their early 20s, while the other parents were between 30 and 40. Less than half the fathers regularly lived at home.

All families shared the following characteristics:

- Income was irregular and inadequate.
- Parents were unable to manage their income.
- Children did not have adequate food, clothing and care.
- Neither children nor parents received health care on a consistent basis and the families frequently failed to keep clinic appointments.
- All parents had serious marital problems.
- As minors, all parents had experienced extreme physical and emotional deprivation, frequently complicated by abuse and placement away from home.

The level of ego functioning of the parents, with two exceptions, could only be described as grossly immature and childlike. They were simply unable to cope for an extended period of time. Anxiety over their feelings of helplessness was manifested in denial and escape, which took such forms as drinking, withdrawing from reality and actually leaving home.

Many parents sat listlessly throughout the day while their chaotic worlds swirled about them. They communicated with each other and their children through actions, mostly inappropriate, rather than words.

The children, in general, had low frustration tolerance and self-esteem. They were hyperactive and had difficulty in peer relationships. The development of pre-school children tended to be several years behind the norm. Some of the three- and four-year-olds were unable to speak. Some were withdrawn; others were overly aggressive.

While it was anticipated that the children would have serious behavioral and learning problems, the extent and consistency of their problems were much greater than envisioned.

The married children from these families had already followed painfully in the footsteps of their parents. They had made very poor adjustments to married life. Several were unemployed. In addition, several of the older adolescents were delinquent and one was in a correctional institution.

Ten of the boys below junior high age had such a serious combination of learning and behavioral problems that an educational therapy program was established for them. They refused to attend school and the schools preferred it that way. The six- to eight-

Background of Project

The concept for this project evolved during the Juvenile Protective Association's six decades of helping abused and neglected children.

The association, together with the Chicago Bar Association, helped establish the first juvenile court in the United States, promoted the first socialized courts in the country and was instrumental in organizing what later became the Institute for Juvenile Research.

Studies by the association have brought to light such exploitive practices as child labor, commercial baby farms, devastating punishment for juveniles and child prostitution.

The association, which counts Jane Addams and Mrs. Joseph Bowen among its founders, sent staff members into homes where abuse and neglect was suspected long before it was accepted practice to do so. For this reason the association recognized that without some effort to help promote a more stable life on the part of the parents, significant strides were not likely to be made with the children.

It was with this background that the concept to reclaim children and their parents who are socially, mentally and physically impoverished evolved.

year-old children exhibited similar characteristics, but their defenses and delinquency patterns were not so well established.

Services provided

After a survey of the needs of prospective participants, it was decided that the center would offer 10 services, ranging from health care to educational therapy. They are detailed below.

Casework. The major service was casework in that it was the caseworker who assessed the problems of each family, determined what other services were needed, arranged for them and planned the timing of those services. Caseworkers served 31 children and 40 adults—at least one adult in each family. During the four and one-half years these services were offered, there were 4,301 casework interviews, two-thirds of which were held at the center.

Typically, the visits to the home were complex excursions, which involved several attempts to find the family at home. Once inside, the caseworker usually found visiting neighbors which complicated the interview.

In one extreme case, a caseworker visited the apartment of the family for three months before she was able to sort out various members of the family and determine that there were actually three families living together.

Many contacts with the family were categorized as "home visits" but really involved taking the family to court, school, hospital or another agency.

In order to get one or both parents to the center for an interview, the standard practice was for the caseworker to make the appointment, remind the family of it, provide a babysitter and furnish transportation.

About one-fourth of the casework interviews involved helping the families receive help from community agencies, which usually required extended negotiations with the agencies.

The cost of a caseworker interview ranged from $15 to $25 during the project. For purposes of estimating costs, an interview at the center was considered one interview, a visit to the home was considered two interviews and a trip for medical care was considered three.

The success of the caseworkers might be measured in part by the fact that the court saw fit to remove children from only eight families. Another measure of success was that only two pregnancies occurred among the families.

Financial Assistance. Financial aid ranged from one dollar to $1,811. Most of this was used to meet short-term emergencies, such as a delayed welfare check or a short-term layoff. Sometimes money was used for birthday presents. Total financial aid for the entire project was $9,296.

Health Care. Health care was defined as "the intervention process necessary to help or prod parents into taking a minimum responsibility for their children's health." Children received 95 percent of the 1,300 health service units rendered. Since a unit normally took three to four hours time, the estimated cost of arranging for the service and delivering the family to it was between $20,000 and $30,000.

Day Care. In the opinion of the staff, day care ranked first in impact on the development of the children. Thirty-nine children from 21 families received a total of 8,070 day care sessions. To prepare the children for school, it was felt this service should focus on parenting and remedial socialization.

Day care included trips to parks, museums and other experiences designed to develop language skills, manual skills and encourage independent functioning.

The annual cost per child was between $5,000 and $6,000. While this was high compared with group babysitting programs, the center noted that it was comparable to other intensive day care treatment programs.

Group Work. Group sessions were aimed at socializing the families and at developing their personalities by offering a range of experiences.

Families could not comfortably and effectively relate to others in even the most mundane situations. They lacked such skills as carrying on a conversation, agreeing and disagreeing, and planning.

About three-fourths of the group work was in the afternoon, beginning when the children were picked up at school. It was necessary to have one

staffmember for every two to three children, because of their behavior problems. Following refreshments at the center, the children were divided into age groups and participated in a variety of crafts, arts and games.

During the last two years of the project, a group work session was established for a dozen of the most isolated and immature mothers. Seven mothers became enthusiastic about it and decided to spend one day a week together shopping, celebrating birthdays, visiting museums and other points of interest.

During the final year, this program was stepped up to twice a week—one day for purely social activities and the other for teaching child care and adult-child relationships.

In all, there were about 7,000 person-sessions, with 261 sessions devoted to the mothers in the last year and one-half. The cost of the service was about $30,000 per year.

Pupil Support. This service was not originally planned, but evolved informally during the first year. It developed into tutoring, visits to the classroom, transportation and providing lunches. Had there been more staff, this service would have been expanded. Consultation with teachers was the most important factor in helping the children negotiate school life. About 200 such visits were made, half of them by caseworkers.

The cost of this service was not broken out, because it was such an integral part of the total effort of the center.

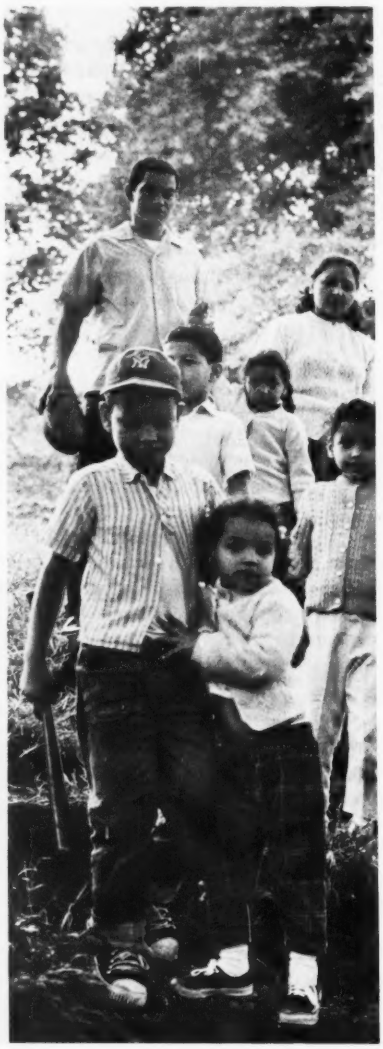
Homemaker Service. At first the homemaker was sent to the participants' homes to temporarily relieve a mother or to teach techniques of homemaking. Later, however, the skills were taught to groups at the center. While the focus was on the more necessary skills of cooking, sewing and laundry, such subjects as home decorating were also worked in to the delight of some of the participants.

Shelter Care. An apartment on the third floor of the center was used as an emergency shelter for a total of 635 nights. The shortest stay was eight days, the longest 297. There was no cost breakout for the apartment.

Foster Care. During the last three years of the program, foster care was given to 16 children from seven families for a total of 2,026 person nights. While the center's foster home was intended for temporary care, several children lived there for one to three years. The cost of this service averaged over $20 per day.

Educational Therapy. During the first year of operation there were a number of boys between eight and 12 who the public schools refused to readmit to classes because they were destructive, hyperactive and virtually uncontrollable. Ten boys received this therapy for three years.

The therapy was a highly individualized program which helped the students achieve not only the required academic skills, but also the social skills necessary to re-enter schoc . Self-confidence and self-control were the key areas developed.



Some 1,750 person-days of therapy were delivered each year for a cost of about $40,000 annually. This cost was only about half that of established residential treatment centers in the community.

Conclusions and results

The official report of the proje demurred in assessing how easily the techniques developed during the project could be adapted to other projects. There were, however, a number of conclusions as well as measurable results.

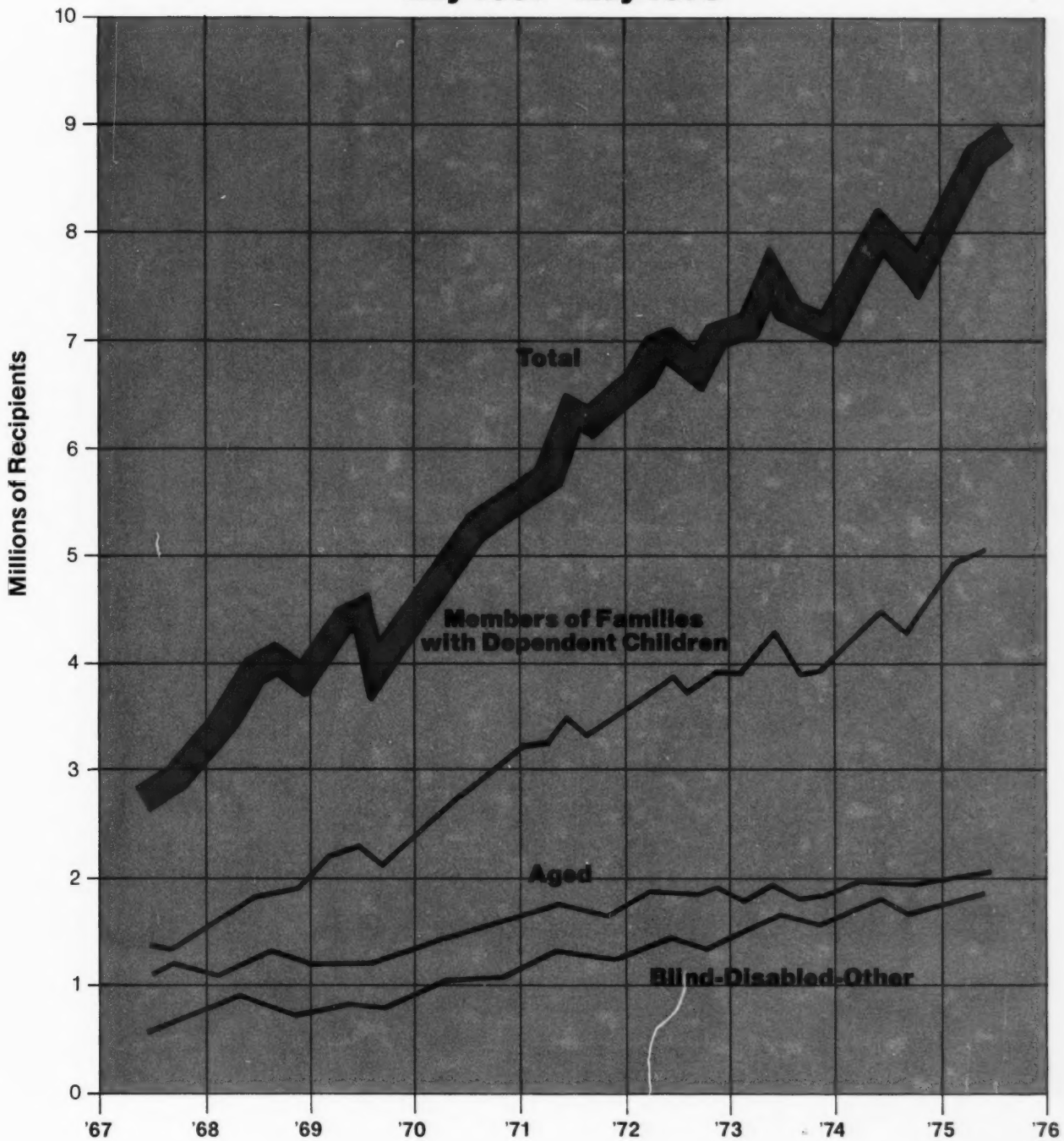
A general conclusion was that "families in which there are serious problems of neglect can be helped to move to a level of functioning sufficient for the children to live in their own homes . . . We wish to emphasize that our experience would strongly support the position that the provision of services to parents in severe neglect situations without concomitant services to the children is inadequate."

Another conclusion was: "Earlier intervention, particularly with the older children, would have facilitated their intellectual achievements to a greater extent."

In addition to the results mentioned previously, the report noted that the children in the group service program all made substantial progress in socialization, peer relationships, and "they developed interests which allowed them to derive greater satisfaction from the education and social experiences at school."

As for the parents, by the time the project terminated most of them were "functioning at an improved level and felt more secure and had developed greater self-esteem." In addition, their "neglecting symptoms" had been ameliorated to a substantial degree. "However," the report said, "they were still somewhat shaky in independent functioning. Some, who had the most serious personal limitations under optimal circumstances, need some supportive help in parenting until the children are older. Others just need a longer period of time to stabilize their gains."

Number of Medicaid Recipients May 1967–May 1975*



* Does not include recipients for whom the only payment was a premium or per capita payment into agency pooled fund, into social security administration system, or to health-insuring agency, and individuals furnished medical assistance from state-local general assistance funds. Data shown is for middle month of each quarter.

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